FEDERAL COMMUNICATIONS COMMISSION Washington, DC 20554

Approved by OMB 3060-0076 Est. time per response: 1 hour

COMMON CARRIER ANNUAL EMPLOYMENT REPORT

[Please read instructions before completing and for Notice regarding public burden.]

				r lease read ii	istructions ber	ore completi	ing and for No	lice regarding p	Jublic Durder	1-]						
SECTION 1 - General Information	n S															
Name and Mailing Address of Respondent Mobile Radio Communications, Inc. 1925 Baltimore Ave. Kansas City, MO 64108-1911													Check here if this is a change of address.			
2. Year Report Filed	Period (End overed by Re 2/2018	ing Date of Pa port)	зу		4. Number of Full-Time Employees during Selected Reporting Period (check one): a. ☐ Fewer than 16 (complete Sections I, IV, and V only) b. ☐ 16 or more (complete all sections)											
SECTION II - Full-Time Employe	es.	1					D 10	or more (comp	nete all sect	ioris)					-	
		Number of Employees (Report employees in only one category)														
Job Categories		Race/Ethnicity														
	His	Hispanic or Not-Hispanic or Latino											Total			
	L	atino	Male						Female						Columns A - N	
	Male	Female	White	Black or African American	Native Hawaiian or Other Pacific Islander	Asian	American Indian or Alaska Native	Two or more races	White	Black or African American	Native Hawaiian or Other Pacific Islander	Asian	American Indian or Alaska Native	Two or more races	A-N	
	Α	В	С	D	E	F	G	н	ĵ	J	к	L	м	N	О	
Executive/Senior Level Officials and Managers	.1														0	
First/Mid-Level Officials and Managers 1.	.2														0	
Professionals	2														0	
Technicians	3														0	
Sales Workers	4														0	
Administrative Support Workers	5														0	
Craft Workers	6														0	
Operatives	7	9,7													0	
Laborers and Helpers	8														0	
Service Workers	9														0	
TOTAL	0 0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
PREVIOUS YEAR TOTAL	11														0	

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SECTION III - Part-Time Emplo	oyee	s.															
		Number of Employees (Report employees in only one category)															
Job		Race/Ethnicity															
Categories		Hispanic or Latino		Not-Hispanic or Latino													
				Male							Female						
21		Male	Female	White	Black or African American	Native Hawailan or Other Pacific Islander	Asian	American Indian or Alaska Native	Two or more races	White	Black or African American	Native Hawaiian or Other Pacific Islander	Asian	American Indian or Alaska Native	Two or more races		
		Α	В	С	D	E	F	G	Н	1	J	к	L	М	N	0	
Executive/Senior Level Officials and Managers	1,1															0	
First/Mid-Level Officials and Managers	1,2		1													0	
Professionals	2															0	
Technicians	3			u.—												0	
Sales Workers	4															0	
Administrative Support Workers	5															0	
Craft Workers	6															0	
Operatives	7															0	
Laborers and Helpers	8															0	
Service Workers	9															0	
TOTAL	10	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
PREVIOUS YEAR TOTAL	11															0	
SECTION IV - Report of Discr	imin	ation Comp	laints Pursua	ant to 47 CFF	22.321, 23.	55, 90.168, 1 0	1.4, and 101	.311.						X====			
This is to advise the company before a										ritorial, or loc	al statutes ha	ve been filed a	against this				
This is to advise the (Attach a list indicate)																	
SECTION V - Certification I certify that to the best of my ki	nowle	edge, inform	ation, and bel	ief, all statem	ents in this re	port are true a	nd correct.		\								
Date	Туре	ed or Printed Name of Person Signing Signature Telephone No.															
			A. Phill	3 5/		S X							(816) 221-2720				
Title of Person Signing President					WILLFULLY FALSE STATEMENTS MADE ON THIS FORM ARE PUNISHABLE BY FINE AND/OR IMPRISONMENT (18 U.S.C. 1001) AND/OR REVOCATION OF ANY STATION LICENSE OR CONSTRUCTION FERMIT (47 U.S.C. 312 (A)(1) AND/OR FORFEITURE (47 U.S.C. 503).												